

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

RECEIVED
JUN 02 2017
Bayfield Co. Zoning Dept.

ENTERED

Permit #:	17-0611
Date:	6-13-17
Amount Paid:	900 68-17
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVATE <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER		
Owner's Name: <u>TIM FLEDD</u>	Mailing Address: <u>801 CENTER CT OMAHA, NE 68130</u>	Telephone: _____
Address of Property: _____	City/State/Zip: <u>CABLE WI 54821</u>	Cell Phone: <u>608-317-1315</u>
Contractor: <u>RICK YERHOUT BUILDER</u>	Contractor Phone: <u>507-273-8127</u>	Plumber: <u>THOMAS PLUMBING</u>
Authorized Agent: (Person Signing Application on behalf of Owner(s)) <u>RICK YERHOUT</u>	Agent Phone: <u>544-58</u>	Agent Mailing Address (Include City/State/Zip): <u>44405 EAGLE PT DRIVE CABLE, WI 54821</u>
PROJECT LOCATION	Legal Description: (Use Tax Statement) <u>1/4, 1/4</u>	Tax ID# (4-5 digits) <u>16933</u>
Section <u>33</u> , Township <u>44</u> N, Range <u>06</u> W	Vol & Page <u>7/282</u>	Block(s) No. _____
Lot Size <u>200 X 253</u>	Subdivision: <u>GRANDVIEW</u>	Acres <u>1.46</u>
Distance Structure is from Shoreline: <u>105</u> feet	Distance Structure is from Floodplain: <u>85</u> feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Value at Time of Completion * include donated time & material <u>\$ 300,000</u>	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water						
							<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
							<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Z Well
							<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists)	Specify Type: <u>MOULD</u>	<input type="checkbox"/>
							<input type="checkbox"/> Relocate (existing bldg)	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Run a Business on Property	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> No Basement	<input type="checkbox"/>	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>						
Existing Structure: (if permit being applied for is relevant to it) Proposed Construction: _____												
Length: <u>48'</u>		Width: <u>72'</u>		Height: <u>30'</u>								

Proposed Use	✓	Proposed Structure		Dimensions	Square Footage
		Principal Structure (first structure on property) <u>5th</u>			
<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	<input checked="" type="checkbox"/>	with Loft		(<u>28</u> X <u>54</u>)	<u>1644</u>
<input type="checkbox"/> Residential Use	<input checked="" type="checkbox"/>	with a Porch		(<u>14</u> X <u>14</u>)	<u>196</u>
<input type="checkbox"/> Commercial Use	<input checked="" type="checkbox"/>	with (2 nd) Porch		(<u>8</u> X <u>8</u>)	<u>64</u>
<input type="checkbox"/> Municipal Use	<input checked="" type="checkbox"/>	with a Deck		(<u>12</u> X <u>20</u>)	<u>240</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	with (2 nd) Deck		(<u>24</u> X <u>32</u>)	<u>768</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	with Attached Garage		(<u>24</u> X <u>32</u>)	<u>768</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)		(<u>24</u> X <u>32</u>)	<u>768</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Mobile Home (manufactured date) _____		(<u>24</u> X <u>32</u>)	<u>768</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Addition/Alteration (specify) _____		(<u>24</u> X <u>32</u>)	<u>768</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Accessory Building (specify) _____		(<u>24</u> X <u>32</u>)	<u>768</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Accessory Building Addition/Alteration (specify) _____		(<u>24</u> X <u>32</u>)	<u>768</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Special Use: (explain) _____		(<u>24</u> X <u>32</u>)	<u>768</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Conditional Use: (explain) _____		(<u>24</u> X <u>32</u>)	<u>768</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other: (explain) _____		(<u>24</u> X <u>32</u>)	<u>768</u>

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____ Date: _____
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent: [Signature] Date: 5/25/17
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
Address to send permit: 44405 EAGLE PT DRIVE CABLE WI 54821
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(*) Driveway and (*) Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
- (6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
- (7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**

See Attached

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of <u>Eastman Rd</u>	<u>78'</u> Feet	Setback from the Lake (ordinary high-water mark)	<u>105' + 85'</u> Feet
Setback from the Established Right-of-Way	<u>43'</u> Feet	Setback from the River, Stream, Creek	<u>N/A</u> Feet
Setback from the North Lot Line	<u>410'</u> Feet	Setback from the Bank or Bluff	
Setback from the South Lot Line	<u>20'</u> Feet	Setback from Wetland	
Setback from the West Lot Line	<u>Road</u> Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Feet
Setback from the East Lot Line	<u>Lake</u> Feet	Elevation of Floodplain	<u>—</u> Feet
Setback to Septic Tank or Holding Tank	<u>15'</u> Feet	Setback to Well	<u>430'</u> Feet
Setback to Drain Field	<u>450'</u> Feet		
Setback to Privy (Portable, Composting)	<u>—</u> Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: <u>17-46S</u>	# of bedrooms: <u>—</u>	Sanitary Date: <u>—</u>	
Permit Denied (Date): <u>—</u>		Reason for Denial: <u>—</u>			
Permit #: <u>17-6811</u>	Permit Date: <u>6-18-17</u>				
<input type="checkbox"/> Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <u>NO</u>	<input type="checkbox"/> Mitigation Required	<input type="checkbox"/> Yes <u>NO</u>	<input type="checkbox"/> Affidavit Required	<input type="checkbox"/> Yes <u>NO</u>
<input type="checkbox"/> Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lots) <u>NO</u>	<input type="checkbox"/> Mitigation Attached	<input type="checkbox"/> Yes <u>NO</u>	<input type="checkbox"/> Affidavit Attached	<input type="checkbox"/> Yes <u>NO</u>
<input type="checkbox"/> Is Structure Non-Conforming	<input type="checkbox"/> Yes <u>NO</u>	<input type="checkbox"/> Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <u>NO</u>	<input type="checkbox"/> Case #: <u>N/A</u>	
<input type="checkbox"/> Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <u>NO</u>	<input type="checkbox"/> Case #: <u>N/A</u>			
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Inspection Record: <u>Property lines & Project location marked w/Flags</u>					
<u>Location appears to be Code compliant.</u>					
<u>OK to issue LP permit</u>					
Date of Inspection: <u>6/2/2017</u>	Inspected by: <u>Robert Schreman</u>	Zoning District: <u>(R1)</u>			
		Lakes Classification: <u>(2)</u>			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.)					
<u>Must Contact local Uniform Dwellings Code inspection Agency and Secure a Uniform Dwelling Code Permit as required by State Statute.</u>					
Signature of Inspector: <u>—</u>		Date of Approval: <u>6/15/17</u>			
Hold For Sanitary: <u>NO</u>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input checked="" type="checkbox"/> <u>Registration</u>	

Dropings

(9)
(5)
(4)
(3)
(2)
(1)

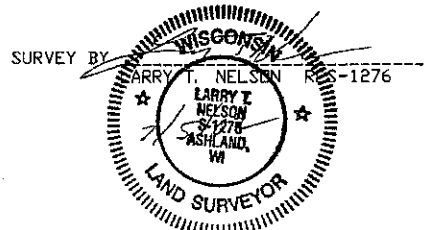
3669

GL 3

33.44.6

282

BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. 1204
LOCATED IN GOV'T. LOT 3, SECTION 33, T. 44 N., R. 6 W.,
IN THE TOWN OF GRAND VIEW, BAYFIELD COUNTY, WI.
(AS DESCRIBED IN VOL. 769 ON PAGES 343-344)

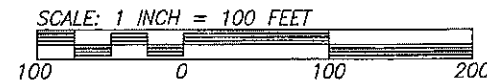


BEARINGS ARE ASSUMED, BASED ON THE
EAST LINE OF SEC. 33 BEARING S 00°26'46" E

LINE	BEARING	DISTANCE
L1	S 53°54'33" W	14.26
L2	S 36°32'16" E	23.04

NOTE: OUTLOT 1 IS A SUBSTANDARD LOT AND SHALL
BECOME A CONTIGUOUS PART OF LOT 2 AND SHALL NOT BE
SOLD SEPARATELY THEREAFTER.

INGRESS AND EGRESS TO THESE PARCELS IS PROVIDED
AND DESCRIBED AS "PARCEL 3" IN VOL. 769 ON PAGE
344 AS RECORDED IN THE BAYFIELD COUNTY REGISTER OF
DEEDS OFFICE.



LEGEND

- FOUND ANGLE IRON, UNLESS NOTED
- 1" (OD) X 24" IRON PIPE SET,
WT. = 1.13 #/FT.
- () RECORDED DATA

CLIENT: REICHERT

JOB NO: 064/02
SCALE: 1" = 100'
DATE: 6/10/02

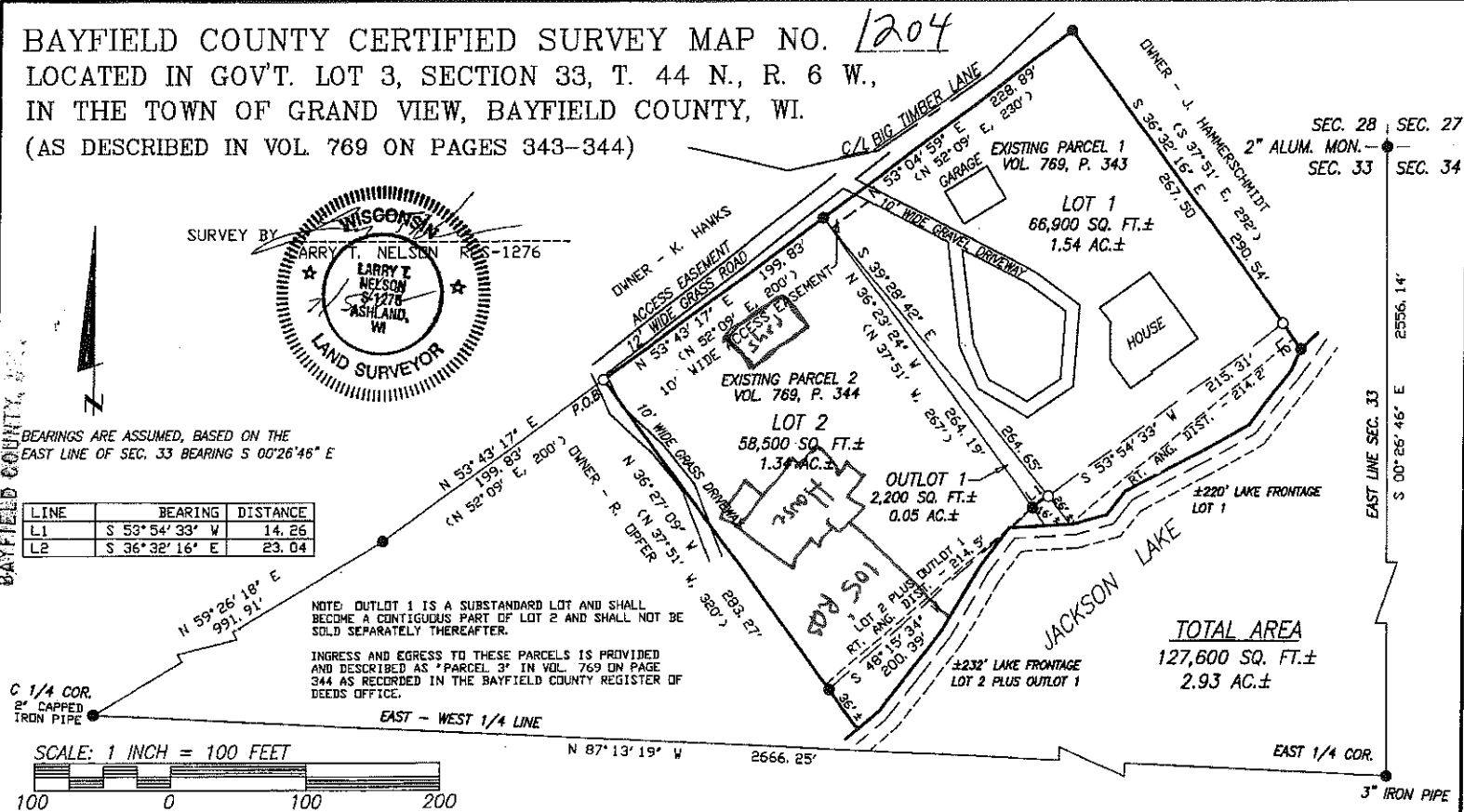
DRAFTED BY: JRN
DISK: 352
FILE: 64_02
NB. 318/PG. 14
SHEET 1 OF 2

NELSON
SURVEYING
INCORPORATED

SURVEYING NORTHERN WISCONSIN SINCE 1957

101 W. MAIN STREET
SUITE 207
ASHLAND, WISCONSIN 54806
(715) 682-2692
FAX: (715) 682-5100
WWW.NELSONSURVEYING.COM

CSM NO. 1175



Vol 2 of CSM No. 282-
Otto Korpela 283
REGISTER OF DEEDS

02 JUL 8 PM 2 49

474110

RECEIVED

JUL 08 2002

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

City, Village, State or Federal
May Also Be Required

LAND USE – X
SANITARY – 17-46S
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

No. **17-0211** Issued To: **Timothy Flood**

Location: - ¼ of - ¼ Section **33** Township **44** N. Range **6** W. Town of **Grand View**

Gov't Lot Lot **2** Block Subdivision CSM# **1204**

For: **Residential Use:** [**1- Story; Residence (28' x 54') = 1,512 sq. ft.;** **Porch #1 (14' x 14') = 196 sq. ft.;**
Porch #2 (8' x 8') = 64 sq. ft.; Deck (12' x 20') = 240 sq. ft.;
Attached Garage (24' x 32') = 768 sq. ft.] Total Overall = 2,912 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must contact local UDC inspection agency and secure a UDC permit as required by State Statute.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.
This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

June 13, 2017

Date